

# CLAIMS ONLY

Application Number

10/708614

Filing Date

Applicant(s)

\* May be used for additional claims or amendments

CLAIMS	AS FILED		AFTER FIRST AMENDMENT		AFTER SECOND AMENDMENT		* May be used for additional claims or amendments							
	Indep	Depend	Indep	Depend	Indep	Depend	Indep		Depend		Indep		Depend	
1	/		/				51							
2		/		/			52							
3		/		/			53							
4		/		/			54							
5		/		/			55							
6		/		/			56							
7		/		/			57							
8		/		/			58							
9		/		/			59							
10		/		/			60							
11		/		/			61							
12		/		/			62							
13		/		/			63							
14		/		/			64							
15		/		/			65							
16		/		/			66							
17		/		/			67							
18		/		/			68							
19		/		/			69							
20	/		/				70							
21		/		/			71							
22		/		/			72							
23		/		/			73							
24		/		/			74							
25		/		/			75							
26		/		/			76							
27		/		/			77							
28		/		/			78							
29		/		/			79							
30		/		/			80							
31		/		/			81							
32		/		/			82							
33		/		/			83							
34		/		/			84							
35		/		/			85							
36							86							
37							87							
38							88							
39							89							
40							90							
41							91							
42							92							
43							93							
44							94							
45							95							
46							96							
47							97							
48							98							
49							99							
50							100							
Total Indep	2		2				Total Indep							
Total Depend	32		32				Total Depend							
Total Claims	34		34				Total Claims							

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